

PROJECT EVALUATION FORM

CCC-58 (REV. 08/97)

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[A] PROJECT DATA

Project/Work Code:		Center Code:	Center:
Contract:	Hourly/Performance:		Resource Category:
Project Title:			
Project Description:			
<i>SAMPLE COPY ONLY</i>			
Project Evaluator:			Date:

[B] SPONSOR INFORMATION

Agency Code:	Sponsor Organization:	Address:	
City:		State:	ZIP:
Sponsor Representative:	Title:		Phone:
Technical Supervisor:	Title:		Phone:

[C] EMERGENCY RESPONSE INFORMATION

CDF Incident #:	CDF Req #:	OES #:	HQ Ref #:
CCC Index #:	Corpsmember Overtime Pay Serial #:		

[D] ESTIMATE INFORMATION

Hours:
Start Date:

[E] WORKSITE INFORMATION

Directions to Worksite Location:		
ZIP:	County Code:	County:

[F] FOR HQ USE ONLY (initial and date)

Received:	Logged:	Verified:
Analyst:	Entered:	Checked:

[G] EDUCATIONAL ACTIVITIES scheduled during the work day.

SPONSOR: Educational presentation to increase Corpsmember understanding of the natural environment	Length of time scheduled:
CCC: The CCC will be doing the following work/learn activities.	Length of time scheduled:

[H] EQUIPMENT & MATERIALS

To be supplied by SPONSOR:		To be supplied by CCC:	
Qty	Description	Qty	Description

Special SPIKE equipment needed by crew:
SPIKE Information (description and location of housing):

[I] NARRATIVE ON HOW PROJECT WILL MEET ALL LEGISLATIVELY MANDATED OBJECTIVES
 (Assign a numerical rating: 1=low, 2=medium, 3=high)

Conserving, improving, developing natural resources, maintaining environmentally important lands or waters:	RATING:
Providing public benefit or access (Estimated visitor use, increased safety, reduced maintenance costs, etc.):	RATING:
Providing Corpsmembers with opportunities for training in employable skills (e.g. specific tools and use, fire control, carpentry):	RATING:

[J] PROJECT CHECKLIST & SIGNATURE BLOCKS

IN SIGNING THIS DOCUMENT, THE PROJECT COORDINATOR AND CONSERVATION SUPERVISOR VERIFY THAT: <ul style="list-style-type: none"> <input type="checkbox"/> A CCC-96 (Sponsor Agreement) has been submitted to HQ. <input type="checkbox"/> If a reimbursable project, a CCC-96A and/or STD-13 (contracts) have been submitted to HQ. <input type="checkbox"/> If the sponsor is a non-profit entity, a statement of non-profit status is on file. <input type="checkbox"/> The project conforms to CCC Health & Safety Program guidelines (Section 6-3). <input type="checkbox"/> A CCC-175 (Job Hazard Analysis) has been completed and is attached. 		
Project Coordinator:	Print	Sign
Date:		
Conservationist Supervisor:		Date:

IN SIGNING THIS DOCUMENT THE SPONSOR VERIFIES THAT (check one box): 1. <input type="checkbox"/> They have provided the location, identity, and amounts of any hazardous substances at the worksite on an attached sheet and have provided all appropriate Material Safety Data Sheets for hazardous materials that are present at the worksite. OR <input type="checkbox"/> that to the best of their knowledge the worksite is free of any known hazardous materials (such as residues from pesticide applications, storage of solvents, and spills of hazardous substances.) 2. AND that all applicable local, state, and federal permits approvals, and clearances have been obtained. Sponsor Representative:		
Print:	Sign:	Date: